PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032
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no person are required to respond to a collection of information unless it displays a valid OMB control number. Under the Paperwork Complete if Known Effective on 12/08/2004. 09/397,920-Conf. #009398 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number FEE TRANSMITTAL Filing Date September 17, 1999 Hideyuki SAKAIDA First Named Inventor For FY 2005 Examiner Name Y. J. Couso Applicant claims small entity status. See 37 CFR 1.27 2625 Art Unit TOTAL AMOUNT OF PAYMENT 1982-0136P (\$) 1,520.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Money Order Check Credit Card None Other (please identify): Х Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity** Small Entity Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 n n 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims** Fee Paid (\$) Extra Claims **Multiple Dependent Claims** Fee (\$) Fee Paid (\$) **Extra Claims** Fee Paid (\$) Indep. Claims 14 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Total Sheets** Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1401 Notice of appeal 500.00 Extension for response within third month 1,020.00 SUBMITTED BY Registration No. Signature 40,439 Telephone (703) 205-8000 (Attorney/Agent) Name (Print/Type) Date D. Richard Anderson July 1, 2005



MS AF
REPLY UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP

AMENDMENT TRANSMITTAL LETTER						Docket No. 1982-0136P	
Application No. 09/397,920-Conf. #009398		Filing Date September 17, 1999		Examiner Y. J. Couso	Examiner Y. J. Couso		
Applicant(s): Hideyuki SAKAIDA							
IMAGE CONVERSION METHOD AND APPARATUS, IMAGE CONVERSION Invention: PROCESSING PROGRAM, AND RECORDING MEDIUM ON WHICH IMAGE CONVERSION PROCESSING PROGRAM IS RECORDED							
MS AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.							
CLAIMS AS AMENDED							
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate			
Total Claims	22	- 22 =		x			
Independent Claims	14	- 14 =		x			
Multiple Dependent Claims (check if applicable)							
Other fee (please specify):  Notice of appeal; Extension for response within third month					1,520.00		
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					1,520.00		
X   Large Entity							
BIRCH, STEWA 8110 Gatehous Suite 100 East P.O. Box 747 Falls Church, V (703) 205-8035	e Rd		_P				